lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A

Reset Form

JAN 2 2008

Des Moines, Iowa 50319 Fax: 515-281-4073	FOR INSTRUCTO DISCLOSUR	IONS, SEE BACK OF FORM E SUMMARY PAGE		fax
COMMITTEE NAME (Must be	e same as on Statement of Or		7	
Citizens to Re-Elect Wayne				FORM
(4) County Central Committee / 5	of committee you are reporting to Standing for Retention Candidate 5)County Candidate (6)City Car ty PAC (9)City PAC (10)School	(2)State PAC (3)State Party (2)State PAC (3)State Party adidate (7)School Board or Other Political bi Board or Other Political Subdivision PAC (Ĺ	DR-2 Rev. 07/2007) DISCLOSURE REPORT
CANDIDATE COMMITTEES	ONLY:		₹ I	comm.#
Candidate Name Wayne Ford		Political Party (if applicable) Democrat	s	conned
Office Sought State Representative		District (if Senate or House) 65		udited
SIGNATURE OF PERSON FIL	MUSEN ING REPORT	Pursuant to lowe Code sections 688.32A(7): 5/5-577-8466 TELEPHONE	and 68	A.401(3), the candidate, for a DATE SIGNED
AM FILING A January 19, 20	AV8	REPORT FOR (1) ELECTION /(2)	NON-	ELECTION YEAR.
, ,	port date)	indicate by # 1]	
CHECK IF AMENDMENT TO	REPORT DATED	Loca	d Com	mittees, enter Date of Election
	file reports until a DR-3 is file	Wild	h Eleci	ocal Committees, enter County in tion is held
	ENT OF CASH ON HAN			
CASH ON HAND at the beginni committee. This amou of the last reporting pe	unt MUST be the same as the	otal of all funds held by the cash on hand at the end first report filed.)	s	766.10
	TAKEN IN THIS PERIOD	•		
Schedule A: Cash Co	ntributions total (Attach Sched	dute A) (*also see in-kind below)	•••	2,075.00
Schedule F: Loans Re	eceived total (Attach Schedule	F)	••••	
		ach Schedule H)	• • • •	
(Schedule H	applies to Candidates' Com	mittees Only)		2.841.10
			\$	4,071.10
SUBTRACT TOTAL M	ONEY SPENT THIS PERIOD	SUB-TOTAL	\$	2,041.10
		SUB-TOTAL	-	2,435.37
Schedule B: Expenditu	ures total (Attach Schedule B)	SUB-TOTAL		
Schedule B: Expendito Schedule F: Loan Rep	ures total (Attach Schedule B) payments total (Attach Schedu	SUB-TOTAL) (**also see debts and loans below)		2,435.37
Schedule B: Expendito Schedule F: Loan Rep ASH ON HAND at the end of the	ures total (Attach Schedule B) payments total (Attach Schedu his reporting period (if final rep	SUB-TOTAL) (**also see debts and loans below) ile F) port balance must be zero)	\$	2,435.37
Schedule B: Expendito Schedule F: Loan Rep ASH ON HAND at the end of the UNPAID BILLS (From Schedu	ures total (Attach Schedule B) payments total (Attach Schedu his reporting period (if final reporting D - Attach Schedule D)	SUB-TOTAL	\$	2,435.37
Schedule B: Expenditon Schedule F: Loan Repart ASH ON HAND at the end of the UNPAID BILLS (From Schedule NKIND CONTRIBUTIONS (From Schedule NKIND CONTRIBUTI	ures total (Attach Schedule B) payments total (Attach Schedule his reporting period (if final reportin	SUB-TOTAL	\$	2,435.37
Schedule B: Expenditon Schedule F: Loan Repart ASH ON HAND at the end of the UNPAID BILLS (From Schedule NKIND CONTRIBUTIONS (From Schedule NKIND CONTRIBUTI	ures total (Attach Schedule B) payments total (Attach Schedule his reporting period (if final reporting period (if final reporting period (if final reporting period (if final reporting D - Attach Schedule E - Attach Schedule F	SUB-TOTAL	\$	2,435.37 405.73 25.00
Schedule B: Expenditus Schedule F: Loan Rep ASH ON HAND at the end of the UNPAID BILLS (From Schedule N KIND CONTRIBUTIONS (From OUTSTANDING LOANS (From ONSULTANT BREAKDOWN (ures total (Attach Schedule B) payments total (Attach Schedule his reporting period (if final reporting period (if final reporting period (if final reporting period (if final reporting D - Attach Schedule D - Attach Schedule F - Attach Schedule G Attached?)	SUB-TOTAL	\$	2,435.37
Schedule B: Expendite Schedule F: Loan Rep ASH ON HAND at the end of the UNPAID BILLS (From Schedule N KIND CONTRIBUTIONS (From OUTSTANDING LOANS (From	ures total (Attach Schedule B) payments total (Attach Schedule his reporting period (if final reporting period (if final reporting period (if final reporting period (if final reporting D - Attach Schedule D - Attach Schedule E - Attach Schedule F - Attach Schedule G Attached?) il-Y:	SUB-TOTAL	\$	2,435.37 405.73 25.00

Reset Form

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens to Re-Elect Wayne Ford

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF 1D NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5/3/07	^{ID#} 9698 CK#	Iowa Assn of Mtg Brokers PAC 4949 Westown Parkway Ste 165-111 'West Des Moines, IA 50266		\$150.00	INCOME
8/12/07	ID# CK#	Sedgewick		1,000.00	
9/10/07	ID# CK# 1303	Fred M. Haskins 505 - 5th, Suite 729 Des Moines, IA 50309		25.00	1
9/10/07	ID# CK# 4939	Andrew J. Baumert 5068 Coachlight Dr, West Des Moines, IA 50265		25.00	7
9/10/07	ID# CK# ₁₄₁₂₅	Barbara L. Boatwright 2331 East 39th Ct Des Moines, IA 50317		50.00	1
9/10/07	ID# 6017 CK# 3197	Central Iowa Bldg & Const Trades Council PAC PO Box 7310 Des Moines, IA 50309-7310		200.00	1
9/10/07	ID# 6046 CK# ₄₃₅₃	Justice 4 All PAC 218 Sixth Ave, Suite 526 Des Moines, IA 50309		100.00	_
9/1 0/ 07	1D# 6070 CK# ₃₅₃₉	Iowa Law PAC 521 East Locust, 3rd Floor Des Moines, IA 50309		100.00	1
9/10/07	1D# 6058 CK# 4079	Iowa Chiropractic Society PAC 1605 N, Ankeny Blvd Suite 100 Ankeny, IA 50023		100.00	1
12/24/07	ID# 6067 CK# 3765	Iowa Health PAC 6750 Westown Parkway #100 West Des Moines, IA 50266		100.00	
			SUB-TOTAL	\$ 1,850.00	

TOTAL (if lest page of this schedule)

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surrame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2 (for Schedule A)

For Instructions, See Back of Form			
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CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	445507 6111	A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Citizens to Re-Elect Wayne Ford			CK THIS BOX IF NDING FORM
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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
12/24/07	ID# CK#	Lloyd Wright 11307 Baritone Ct. Silver Spring, MD 20901		\$100.00	INCOME
12/24/07	ID#	Kevin M. Parker		100.00	
12/14/07	ID# CK#	Tom Dawson 3001 Branch Ave., Apt. 338 Temple Hills, MD		25.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID#				
	ID#	·			
	ID#				
	CK#				
	CK#		SUB-TOTAL	225.00	
		TOTAL (If last pag	e of this schedule)	\$ 225.00 \$ 2075.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinty (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens to Re-Elect Wayne Ford

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Distursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3/21/07	ID# CK#1343	North Star Photography 408 Lacona Ave. Des Moines, IA 50315	Publicity Photos	\$ 390.00
5/2/07	ID# CK#1344	Downtown Holiday Inn 1050 Sixth Avenue Des Moines, IA 50314	Reception Room	279.37
	ID# CK#1345		Check Voided	
5/3/07	ID# CK# ₁₃₄₆	JTM Multimedia P.O. Box 1744 Des Moines, IA 50306	Web Site Hosting	197.70
/27/07	ID# CK# ₁₃₄₇	JTM Multimedia P.O. Box 1744 Des Moines, IA 50306	Web Site Hosting	197.70
0/17/07	ID# CK# ₁₃₄₈	Frederick Douglass Museum & Hall of Fame for Caring Americans 320 A. Street NE Washington, D.C. 20002	Reception Facility	500.00
0/18/07	ID# CK# ₁₃₄₉	County Line Printing 6292 NE 14th Street Des Moines, IA	Promotional Materials	795.00
0/18/07	ID# CK# ₁₃₅₀	Adam Phillips Des Moines, IA	Supplies	55.00
			SUB-TOTAL	\$ 2,414.77

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, adventising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lower Code 88A.402(3)(i).)

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TOTAL (if last page of this schedule) \$

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens to Re-Elect Wayne Ford

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
0/30/07	ID#	West Bank	Printed Checks	
WSWU7	CK#	1600 22nd Street West Des Moines, IA 50265		\$ 20.60
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
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	CK#			
			SUB-TOTA	L \$ 20.60

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TOTAL (if last page of this schedule)

\$ 2,435.37

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 88A.402(3)(i).)

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FOR INSTRUCTIONS, SEE BACK OF FORM	SCHEDULE
COMMITTEE NAME (Must be same as on Statement of Organization) Citizens to Re-Elect Wayne Ford	E IN-KIND (Rev. 06/97) CONTRIBUTIONS
Reset Form	CHECK THIS BOX IF AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
8/20/07	House Truman Fund Iowa Democratic Party		Invitations and Postage	\$ 25.00	1
		\$ 25.00			
			TOTAL (if last page of this schedule)	25.00	

"Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

of 1 (for Schedule E)